

Check if this is:

MM / DD / YYYY

12/15

1. Is this a joint case?

- 2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- | | | | |
|---|--|-----------------|-------------------------------|
| <input checked="" type="checkbox"/> No | | | |
| <input type="checkbox"/> Yes. Fill out this information for each dependent..... | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes |

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

4 \$ 0.00

If not included in line 4:

- | | | | |
|---|-----|----|-------------|
| 4a. Real estate taxes | 4a. | \$ | <u>0.00</u> |
| 4b. Property, homeowner's, or renter's insurance | 4b. | \$ | <u>0.00</u> |
| 4c. Home maintenance, repair, and upkeep expenses | 4c. | \$ | <u>0.00</u> |
| 4d. Homeowner's association or condominium dues | 4d. | \$ | <u>0.00</u> |

Debtor 1

Lisa
First Name**Michelle**
Middle Name**Balthaser**
Last NameCase number (if known) **19-16164-MDC**

		Your expenses
5. Additional mortgage payments for your residence , such as home equity loans	5.	\$ <u>0.00</u>
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$ <u>0.00</u>
6b. Water, sewer, garbage collection	6b.	\$ <u>0.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ <u>0.00</u>
6d. Other. Specify: _____	6d.	\$ <u>0.00</u>
7. Food and housekeeping supplies	7.	\$ <u>0.00</u>
8. Childcare and children's education costs	8.	\$ <u>0.00</u>
9. Clothing, laundry, and dry cleaning	9.	\$ <u>0.00</u>
10. Personal care products and services	10.	\$ <u>0.00</u>
11. Medical and dental expenses	11.	\$ <u>0.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ <u>40.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ <u>0.00</u>
14. Charitable contributions and religious donations	14.	\$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$ <u>0.00</u>
15b. Health insurance	15b.	\$ <u>0.00</u>
15c. Vehicle insurance	15c.	\$ <u>105.00</u>
15d. Other insurance. Specify: _____	15d.	\$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$ <u>0.00</u>
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	\$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b.	\$ <u>0.00</u>
17c. Other. Specify: Storage Unit	17c.	\$ <u>165.00</u>
17d. Other. Specify: _____	17d.	\$ _____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19.	\$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$ <u>0.00</u>
20b. Real estate taxes	20b.	\$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c.	\$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d.	\$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e.	\$ <u>0.00</u>

Debtor 1 Lisa Michelle Balthaser
First Name Middle Name Last Name

Case number (if known) 19-16164-MDC

21. **Other.** Specify: _____

21. **+\$** 0.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ 350.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ 0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 350.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 300.00

23b. Copy your monthly expenses from line 22c above.

23b. **-\$** 350.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$ -50.00

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

pdf

☒ No.

☐ Yes.

Explain here: